JUL 2 7 2005

DW/11

MARY AMEN		ocket No. -0593PUS1						
Application No.		Filing		Examiner		Art Uni		
10/500,701-Cor		July 2,	2004	D. Truong	1711			
plicant(s): Akir	a Mil 1501 et ai	·						
vention: LOW N	OLECULAR V	VEIGHT POLY	PHENYLENI	E ETHER				
Amendment mmissioner for D. Box 1450 exandria, VA 223								
ransmitted here	with is an ame	ndment in the	above-identif	ied application.				
he fee has beer	n calculated an	d is transmitte	d as shown b	elow.				
			S AS AMEN	DED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate				
Total Claims	39	39 =		х				
Independent Claims	1	- 3 =		x				
Ciainis								
Multiple Depend	lent Claims (ch	eck if applicabl	le)					
	•	eck if applicabl		rst month		120.00		
Multiple Depend	e specify): E	Extension for res	ponse within fi	rst month		120.00		
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PTO/SB/17 (12-04v2) Approved for use through 7/31/2006. OMB 0651-0032

EMARY Under the Paperwork Redu	ction Act of 1995	no person are required to	U.S. Pate respond to a collect	on of informa		a valid OMB c	ontrol number.						
	Complete if Known												
Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Nu	Application Number		10/500,701-Conf. #002439							
FEE TRANSMITTAL			Filing Date		July 2, 2004								
For	First Named In	First Named Inventor Akira		kira MITSUI									
	Examiner Nam	er Name D. Truong											
Applicant claims sma	Art Unit	AROIR		1711									
TOTAL AMOUNT OF PAY	YMENT	(\$) 120.00	Attorney Docke	t No.	0071-0593PUS	61							
METHOD OF PAYMENT (check all that apply)													
X Check Credit Card Money Order None Other (please identify):													
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee													
Charge any additional fee(s) or underpayment of x Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17													
FEE CALCULATION			· · · · · · · · · · · · · · · · · · ·										
1. BASIC FILING, SEARC	H, AND EXAM	INATION FEES				·							
	FILING	G FEES SE	EARCH FEES		NATION FEES								
Application Type	Fee (\$)	Small Entity Fee (\$) Fee (Small Entity \$) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)						
Utility	300	150 500		200	100								
Design	200	100 100		130	65								
Plant	200	100 300		160	80								
Reissue	300	150 500		600	300								
Provisional	200	100 0		000	0								
2. EXCESS CLAIM FEES	200	100	U	U	Ū		Small Entity						
Fee Description						Fee (\$)	Fee (\$)						
Each claim over 20 (include	ling Reissues)					50	25						
Each independent claim ov		g Reissues)				200	100						
Multiple dependent claims	•	,				360	180						
· ·			Paid (\$)	aid (\$) Multiple Der			ndent Claims						
-20 = x = =				<u>F</u>	ee (\$) Fee Paid (\$)								
							-						
Indep. Claims Extra			Paid (\$)										
-3=	× _	=											
3. APPLICATION SIZE FE		1 100 -1	. /14:14										
If the specification and dr listings under 37 CFR													
sheets or fraction there					inity) for cach ac	iditional 50							
	xtra Sheets		additional 50 or fra		of Fee (\$)	Fee P	aid (\$)						
		-	(round up to a wh										
4. OTHER FEE(S)			•			Fees P	aid (\$)						
Non-English Specification, \$130 fee (no small entity discount)													
Other (e.g., late Fring surcharge): 1251 Extension for response within first month 120.00													
SUBMITTED BY	1	7											
Signature	nh		Registration No. (Attorney/Agent)	32,881	Telephone	(703) 205	-8000						
Name (Print/Type) Johp W.	Bailey		1		Date JUL	2/2	005						
							j						